

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Dear Applicant:

Please be advised, pursuant to Section 17a-101 of the Connecticut General Statutes (see reverse side), certain health professions regulated by the Department of Public Health are mandated to report suspected child abuse or neglect to the Department of Children and Families (DCF) Child Abuse and Neglect Hotline or a law enforcement agency.

Reports must be made within twelve hours of the moment you suspect the abuse/neglect has occurred. Suspected child maltreatment of any kind, regardless of the identity of the alleged perpetrator must be reported. The Hotline number is 1-800-842-2288 and is available on a 24 hour 7 day a week basis. A copy of the child abuse reporting laws is enclosed. The Hotline can answer questions you may have regarding these laws.

It is important that you become familiar with Connecticut's reporting laws as failure to meet reporting responsibilities may subject you to criminal prosecution and possible action against your license or certificate.

Should you have any questions regarding your licensure or certification, please contact the Department of Public Health at the number in this application.



*Phone: (860) 509-7558
Telephone Device for the Deaf (860) 509-7191
410 Capitol Avenue – MS # 12EMS
P.O. Box 340308 Hartford, CT 06134
An Equal Opportunity Employer*

Connecticut General Statutes, Chapter 319a
Child Welfare
Child Abuse Reporting Laws

Sec.17a-101. (Formerly Sec. 17-38a). Protection of children from abuse. Mandated reporters. Educational and training programs. (a) The public policy of this state is: To protect children whose health and welfare may be adversely affected through injury and neglect; to strengthen the family and to make the home safe for children by enhancing the parental capacity for good child care; to provide a temporary or permanent nurturing and safe environment for children when necessary; and for these purposes to require the reporting of suspected child abuse, investigation of such reports by a social agency, and provision of services, where needed, to such child and family. (b) The following persons shall be mandated reporters: Any physician or surgeon licensed under the provisions of chapter 370, any resident physician or intern in any hospital in this state, whether or not so licensed, any registered nurse, licensed practical nurse, medical examiner, dentist, dental hygienist, psychologist, coach of intramural or interscholastic athletics, school teacher, school principal, school guidance counselor, school paraprofessional, school coach, social worker, police officer, juvenile or adult probation officer, juvenile or adult parole officer, member of the clergy, pharmacist, physical therapist, optometrist, chiropractor, podiatrist, mental health professional or physician assistant, any person who is a licensed or certified emergency medical services provider, any person who is a licensed or certified alcohol and drug counselor, any person who is a licensed marital and family therapist, any person who is a sexual assault counselor or a battered women's counselor as defined in section 52-146k, any person who is a licensed professional counselor, any person paid to care for a child in any public or private facility, child day care center, group day care home or family day care home licensed by the state, any employee of the Department of Children and Families, any employee of the Department of Public Health who is responsible for the licensing of child day care centers, group day care homes, family day care homes or youth camps, the Child Advocate and any employee of the Office of Child Advocate. (c) The Commissioner of Children and Families shall develop an educational training program for the accurate and prompt identification and reporting of child abuse and neglect. Such training program shall be made available to all persons mandated to report child abuse and neglect at various times and locations throughout the state as determined by the Commissioner of Children and Families. (d) Any mandated reporter, as defined in subsection (b) of this section, who fails to report to the Commissioner of Children and Families pursuant to section 17a-101a shall be required to participate in an educational and training program established by the commissioner. The program may be provided by one or more private organizations approved by the commissioner, provided the entire costs of the program shall be paid from fees charged to the participants, the amount of which shall be subject to the approval of the commissioner.

Sec.17a-101a. Report of abuse, neglect or injury of child or imminent risk of serious harm to child. Penalty for failure to report. Any mandated reporter, as defined in section 17a-101, who in the ordinary course of such person's employment or profession has reasonable cause to suspect or believe that any child under the age of eighteen years (1) has been abused or neglected, as defined in section 46b-120, (2) has had nonaccidental physical injury, or injury which is at variance with the history given of such injury, inflicted upon such child, or (3) is placed at imminent risk of serious harm, shall report or cause a report to be made in accordance with the provisions of sections 17a-101b to 17a-101d, inclusive. Any person required to report under the provisions of this section who fails to make such report shall be fined not less than five hundred dollars nor more than two thousand five hundred dollars and shall be required to participate in an educational and training program pursuant to subsection (d) of section 17a-101.

Sec.17a-101b. Oral report by mandated reporter. Notification of law enforcement agency when allegation of sexual abuse or serious physical abuse. Notification of person in charge of institution, facility or school when staff member suspected of abuse or neglect. (a) An oral report shall be made by a mandated reporter as soon as practicable but not later than twelve hours after the mandated reporter has reasonable cause to suspect or believe that a child has been abused or neglected or placed in imminent risk of serious harm, by telephone or in person to the Commissioner of Children and Families or a law enforcement agency. If a law enforcement agency receives an oral report, it shall immediately notify the Commissioner of Children and Families.

(b) If the commissioner or the commissioner's designee suspects or knows that such person has knowingly made a false report, the identity of such person shall be disclosed to the appropriate law enforcement agency and to the perpetrator of the alleged abuse. (c) If the Commissioner of Children and Families, or the commissioner's designee, receives a report alleging sexual abuse or serious physical abuse, including, but not limited to, a report that: (1) A child has died; (2) a child has been sexually assaulted; (3) a child has suffered brain damage or loss or serious impairment of a bodily function or organ; (4) a child has been sexually exploited; or (5) a child has suffered serious nonaccidental physical injury, the commissioner shall, within twelve hours of receipt of such report, notify the appropriate law enforcement agency.

(d) Whenever a mandated reporter, as defined in section 17a-101, has reasonable cause to suspect or believe that any child has been abused or neglected by a member of the staff of a public or private institution or facility that provides care for such child or a public or private school, the mandated reporter shall report as required in subsection (a) of this section. The Commissioner of Children and Families or the commissioner's designee shall notify the person in charge of such institution, facility or school or the person's designee, unless such person is the alleged perpetrator of the abuse or neglect of such child. Such person in charge, or such person's designee, shall then immediately notify the child's parent or other person responsible for the child's care that a report has been made.

17a-101c. Written report by mandated reporter. Within forty-eight hours of making an oral report, a mandated reporter shall submit a written report to the Commissioner of Children and Families or his representative. When a mandated reporter is a member of the staff of a public or private institution or facility that provides care for such child or public or private school he shall also submit a copy of the written report to the person in charge of such institution, school or facility or the person's designee. In the case of a report concerning a certified school employee, a copy of the written report shall also be sent by the person in charge of such institution, school or facility to the Commissioner of Education or his representative. In the case of an employee of a facility or institution that provides care for a child which is licensed by the state, a copy of the written report shall also be sent by the mandated reporter to the executive head of the state licensing agency.

Sec.17a-101d. Contents of oral and written reports. All oral and written reports required in sections 17a-101a to 17a-101c, inclusive, and section 17a-103, shall contain, if known: (1) The names and addresses of the child and his parents or other person responsible for his care; (2) the age of the child; (3) the gender of the child; (4) the nature and extent of the child's injury or injuries, maltreatment or neglect; (5) the approximate date and time the injury or injuries, maltreatment or neglect occurred; (6) information concerning any previous injury or injuries to, or maltreatment or neglect of, the child or his siblings; (7) the circumstances in which the injury or injuries, maltreatment or neglect came to be known to the reporter; (8) the name of the person or persons suspected to be responsible for causing such injury or injuries, maltreatment or neglect; and (9) whatever action, if any, was taken to treat, provide shelter or otherwise assist the child.



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

EMERGENCY MEDICAL SERVICES

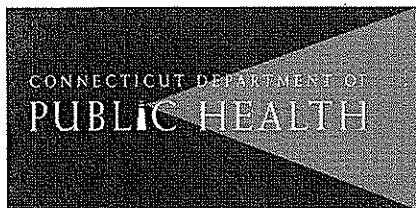
LICENSURE/CERTIFICATION APPLICATION POLICIES FOR ALL PROFESSIONS

AN APPLICATION WILL NOT BE REVIEWED BY PROFESSIONAL STAFF OF THE DEPARTMENT UNTIL ALL REQUIRED DOCUMENTS HAVE BEEN RECEIVED.

- The fee for initial licensure covers the cost of eligibility determination and related administrative functions. At such time as an applicant is determined eligible for licensure, the process of licensure issuance will proceed immediately. The licensure renewal fee is separate and distinct from the application fee. Licenses are renewed annually during the licensee's month of birth. Renewal will be required in the **FIRST** birth month which immediately follows the issuance of licensure. The full renewal fee will be required regardless of the date of initial licensure.
- It is the responsibility of the applicant to arrange for submission of all required documentation for timely completion of the application. The Department does **NOT** notify applicants of incomplete documentation. It is recommended that applicants who are interested in expediting licensure contact the Department periodically to monitor the status of their file with regard to the receipt of supporting documents.
- Educational credentials earned in a country other than the United States (or Canada in some instances) must be evaluated by a credential evaluation service approved by the Department. Documents in a language other than English **MUST** be translated by a certified translation service in accordance with instructions from this office. Applicants to whom these provisions apply should request additional information from this office.
- No personal checks are accepted. Please remit the application fee, by **CERTIFIED CHECK** or **MONEY ORDER ONLY**, payable to "TREASURER, STATE OF CONNECTICUT", in United States dollars. All fees are non-refundable and non-transferable. The fee which accompanies an application covers the cost of reviewing and processing that specific application, **IT CANNOT BE REFUNDED, EVEN IF THE APPLICANT IS FOUND INELIGIBLE FOR LICENSURE.**
- Any incomplete application which has remained inactive for one year will be destroyed in accordance with the agency's record retention plan. To reactivate the application process, a completely new application and fee will be required.
- Licensure requirements are subject to change as a result of new legislation, new Rules and Regulations, or from new policies and procedures adopted by the Department of Public Health working, where appropriate, in cooperation with various Boards of Examiners. Applicants must meet current licensure requirements.
- Licensing examination questions are **NOT** included in the Freedom of Information Act as documents available for review. Whenever possible, however, this division will provide whatever feedback possible with regard to examination performance.
- The Privacy Act of 1974 requires any federal, state or local government agency that requires individuals to disclose their social security numbers to inform those individuals whether the disclosure is mandatory or voluntary, by what statutory or other authority the number is requested and how it will be used. Pursuant to Connecticut General Statutes, Section 17b-137a(a)(1), disclosure of the social security number is mandatory. The social security number is used in the administration and collection of taxes and is also used for child support collection. Please note that the Department will **ONLY** disclose social security numbers to government entities. Your social security number will **NOT** be released to the general public.



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Office of Emergency Medical Services
Emergency Medical Services Certification

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<http://www.dph.state.ct.us/EMS/index.htm>

Keeping Connecticut Healthy

1. Medical Response Technician (MRT) Certification

Eligibility Routes - An applicant must be at least fourteen (14) years old and have satisfied one of the following requirements:

- 1(a) **Examination**- Successful completion, within the past twelve months, of a Department-approved MRT training program in Connecticut that included written and practical examinations, or if outside of Connecticut, a program which adhered to the United States Department of Transportation, National Highway Traffic Safety Administration, First Responder National Standard Curriculum and which included an examination; or
- 1(b) **Examination**- Connecticut certification/licensure as an EMT, EMT-I or paramedic and passage of the final examination required of an MRT initial training program. **Please note that MRT's** must contact either the instructor of the MRT course or if not trained in Connecticut then applicants may contact one of the Regional Offices in Connecticut to obtain examination information. To access contact information for one of the Connecticut's Regional Offices via the Internet please go to
http://www.ct.gov/dph/cwp/view.asp?a=3127&Q=387372&dphNav_GID=1827&dphNav=
- 1(c) **Endorsement**- Current certification as a First Responder by the National Registry of Emergency Medical Technicians or by a state or territory maintaining certification requirements equal to or higher than those of this state. Upon receipt and review of all application materials this office will determine your eligibility under this route. Applicants that do not meet the eligibility requirements may be required to take the initial practical and written examinations prescribed by this Department. Please see Examination Candidate Information section for examination information and see route 3(a) information for documentation requirements. Please see Examination Candidate Information section above for examination information.

Documentation Requirements:

- **If applying by Route 1(a) Examination**, a completed application for MRT certification (FORM 202 attached). Complete the top portion of Form 202 and forward application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office.
- **If applying by Route 1(b) Examination**, a completed application for MRT certification (FORM 202 attached-you need only complete the top portion and return same directly to this office) and official verification, sent directly to this office from the appropriate EMS Instructor verifying your passage of the final examination of an MRT initial training program. Please affix a copy of EMT, EMT-I certification or Paramedic license to the application.
- **If applying by Route 1(c) Endorsement**, a completed application for MRT certification (FORM 202 attached) and arrange for official verification of **current or expired** MRT certification or licensure in another state(s) or territory to be sent directly to this office directly from the state's Licensing/Certification entity (use FORM 203 attached). The other state or territory must also provide their current license/certification requirements. Please note that some jurisdictions may charge a fee for completion of the verification form; contact the jurisdiction for fee information. To access jurisdictions contact information via the Internet please go to
http://www.nremt.org/nremt/about/nremt_news.asp . Upon receipt and review of all application materials this office will determine your eligibility under this route. Applicants that do not meet the eligibility requirements may be required to take the practical and written examinations. Please see route 1(a) information for examination information and documentation requirements.

MRT Recertification

(What to do **before** the expiration of your certification)

To qualify for **recertification** an applicant must recertify on or before the expiration date of the certification. If the certification is not renewed within 90 days of the due date then the certification will become void and or expire and as a result the applicant can no longer practice as an EMS provider (please see reinstatement requirements below). To qualify for **recertification** an applicant shall meet one of the following requirements:

- (A) Applicants must complete an approved refresher-training course, at intervals not to exceed twenty-four months for the period starting with the date of the initial certification and extending through the end of the sixth consecutive year of certification. Starting in the seventh year of certification and thereafter, an applicant for MRT recertification shall complete an approved refresher-training course at intervals not to exceed thirty-six months*. Refresher training courses shall include both written and practical testing; or
- (B) Applicants may complete one out-of-state refresher training course throughout the lifetime of the certificate which may be accepted in lieu of a refresher training course required by this department provided: (i) the applicant is currently certified as a MRT for MRT recertification or as a person entitled to perform similar services under a different designation in another state; (ii) the refresher training program is equal to the refresher training program required by this department; and (iii) the refresher training program is approved by the appropriate regulatory body of such other state.

*To qualify for this provision, applicants must consecutively renew their certification without interruption for sixth consecutive years. Please note that at such time as the certification expires, the holder is no longer eligible for a three-year certification cycle and therefore will go back to a two-year recertification renewal cycle. In other words the holder of the certification needs to do 3 uninterrupted renewals before qualifying for the three-year certification cycle. Applicants who allow their certification to expire must meet the requirements for reinstatement as outlined below. It is recommended that applicants take the approved refresher-training course within six months of the expiration date of the certification. Please note that applicants will not receive credit for a refresher course that is completed more than one year before of the expiration of the certification.

Documentation Requirements:

- A completed application for MRT certification (FORM 202 attached). Complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office.

MRT Reinstatement (What to do after the expiration of your certification)

If the certification is not renewed within 90 days of the due date then the certification will become void and or expire and as a result the applicant can no longer practice as an EMS provider unless the certification is reinstated. Any person certified as an MRT whose certification has expired may apply for reinstatement of such certification as follows:

- a) If such certification expired one year or less from the date of application for reinstatement, such person shall complete an approved refresher course,
- b) if such certification expired more than one year but less than three years from the date of application for reinstatement, such person shall complete an approved refresher course and the written and practical examinations required for initial certification; or
- c) if such certification expired three or more years from the date of application for reinstatement, such person shall complete a full course and the written and practical examinations required for initial certification.

Applicants that let their certifications expire will lose the benefit to recertify every 3 years and thus will revert to renew their certifications every 2 years. The 3-year cycle will end 90 days after the expiration of the certification date. To go back to a 3-year cycle renewal, the applicants must recertify for 3 consecutive 2-year cycles.

Documentation Requirements:

- A completed application for MRT certification (FORM 202 attached). Complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office, and
- If such certification expired more than one year but less than three years from the date of application for reinstatement, such person shall, in addition to the completion of a refresher course and the written and practical examinations required for initial certification

2. Emergency Medical Technician (EMT) Certification

Eligibility Routes - An applicant must be at least sixteen (16) years old and meet one of the following requirements:

- 2(a) **Examination-** Successful completion of a Department-approved EMT training program Connecticut that included written and practical examinations or if outside of Connecticut, a program which adhered to the United States Department of Transportation, National Highway Traffic Safety Administration, EMT National Standard Curriculum; or

- 2(b) **Examination-** Current unrestricted Connecticut licensure as a registered nurse, advanced practice registered nurse, physician or physician assistant and successful completion of a Department-approved 25 hour EMT refresher course that included written and practical examinations; or
- 2(c) **Endorsement-** Current certification as an EMT by the National Registry of Emergency Medical Technicians or by a state or territory maintaining certification requirements equal to or higher than those of this state; or
- 2(d) **Endorsement-** Current, valid license/certification in good standing as an EMT in Maine, Massachusetts, New Hampshire, New Jersey, New York, Rhode Island or Vermont.

Documentation Requirements:

- **If applying by Route 2(a) -Examination,** (1) a completed application for EMT certification (FORM 202 attached). Complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office. (2) Complete a National Registry (NR) application and submit the NR application with your 202 Form to this office. For a National Registry application visit: http://www.nremt.org/downloads/emt_basic_application.pdf. (**Please disregard the instruction on the National Registry Application to include a \$20.00 application fee and to return it directly to the National Registry**). Also, note that your EMS-Instructor must complete Sections I and II on page 2 of the National Registry Application and Section III should be left blank.) Upon receipt and review of all application materials you will be scheduled for examination and notified in writing prior to the scheduled examination. For lists of examination dates visit the department's website: <http://www.state.ct.us/dph/Publications/BRS/HSR/exams.htm>. Please note that applicants must pass the practical examination prior to being eligible for the written examination.
- **If applying by Route 2(b), -Examination,** a completed application for EMT certification (FORM 202 attached). Complete the top portion of Form 202, attach a copy of your current RN, APRN, MD or PA license and forward same to your refresher training instructor, who in turn must complete the bottom portion of the form and return it directly to this office with a letter from the applicant requesting to take the exam. Upon receipt and review of all application materials you will be scheduled for examination (only upon determination of eligibility) and notified in writing prior to the scheduled examination. For lists of examination dates visit the department's website: http://www.ct.gov/dph/cwp/view.asp?a=3127&q=387364&dphNav_GID=1827&dphPNavCtr=#46950. Please note that applicants must pass the practical examination prior to being eligible for the written examination.
- **If applying by Route 2(c) -Endorsement,** a completed application for EMT certification (FORM 202 attached) and arrange for official verification of **current or expired** EMT certification or licensure in another state(s) or territory to be sent directly to this office directly from the state's Licensing/Certification entity (use FORM 203 attached). The other state or territory must also provide their current license/certification requirements. Please note that some jurisdictions may charge a fee for completion of the verification form; contact the jurisdiction for fee information. To access jurisdictions contact information via the Internet please go to http://www.nremt.org/nremt/about/nremt_news.asp. Upon receipt and review of all application materials this office will determine your eligibility under this route. Applicants that do not meet the eligibility requirements may be required to take the practical and written examinations administered by this Department. Please see route 2(a) for examination information and documentation requirements.
- **If applying by Route 2(d) -Endorsement,** a completed application for EMT certification (FORM 202 attached). Complete the top portion of Form 202; arrange for official verification of **current or expired** EMT certification or licensure in another state(s) to be sent directly to this office directly from the state's Licensing/Certification entity (use FORM 203 attached). Please note that some jurisdictions may charge a fee for completion of the verification form; contact the jurisdiction for fee information. To access jurisdictions contact information via the Internet please go to http://www.nremt.org/nremt/about/nremt_news.asp.

EXAMINATION INFORMATION FOR EMT CANDIDATES

EMT applicants must complete a state administered practical examination and the National Registry of Emergency Medical Technician's (NREMT) written examination. The practical examination consists of six stations in which the candidate is expected to direct patient care and be graded individually in six stations. For information regarding the skills stations at the practical examination please visit:

http://www.nremt.org/nremt/EMTServices/exam_coord_man.asp?secID=1

Individuals completing a full basic Connecticut course, applicants that have a current Connecticut RN, APRN, MD or PA license who completed a Connecticut approved refresher course, those individuals who are not certified by the National Registry, and or those that are not able to qualify via endorsement, will be required to take the examinations prescribed by this Department.

The Department of Public Health requires that all EMT candidates taking the practical examination **bring** to the practical examination a certified check or money order, in the amount of **\$30.00**, payable to, "**Treasurer State of Connecticut**". For examination on dates and deadlines please contact this department or click on the following website: http://www.ct.gov/dph/cwp/view.asp?a=3127&q=387364&dphNav_GID=1827&dphPNavCtr=#46950. Please be advised that you will **NOT** be admitted to the practical examination if you do not bring the required fee to the examination site on the day of the practical examination. Please note that results of the practical examinations are good for one year from the date of the last practical examination. Candidates applying for written examination and have a one-year-old practical examination must retake the practical examination before rescheduling for the written exam.

Please be advised that candidates are allowed six (6) opportunities to test for the written examination within a two-year period from the end of the course. Candidates applying for the fourth time must submit an official verification of successful completion of a refresher education (FORM 202). Complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office. This refresher must be completed before the fourth attempt of the examination. Candidates who fail the examination on the sixth attempt or have reached the two-year limit must repeat the entire EMT-Basic training program in order to apply for subsequent examination attempts. Please note that there is no fee required for this examination.

Emergency Medical Technician (EMT) Temporary Permit

An applicant who held Connecticut EMT certification prior to becoming licensed as a Connecticut licensed paramedic may be eligible for a one year, non-renewable, temporary EMT permit.

Eligibility Route – In order to be eligible for the one-year temporary permit, an applicant must:

- Have been **certified** as a Connecticut EMT prior to becoming **licensed** as a paramedic in Connecticut (such EMT certificate and paramedic license must have expired prior to the submission of the application).
- Holders of temporary EMT permits may qualify for reinstatement of a lapsed paramedic license or EMT certification provided the applicant can demonstrate that he/she meets the requirements for reinstatement as indicated in page 8 of this application only if the paramedic meets the requirements as indicated in the paramedic application. To obtain an application for reinstatement of a paramedic license please call our office at 860-509-7558 or visit our website at:
http://www.ct.gov/dph/cwp/view.asp?a=3127&q=387364&dphNav_GID=1827&dphPNavCtr=#46950

Documentation Requirements:

- A completed application for EMT temporary permit (FORM 202 attached). Complete the top portion of Form 202 and return it directly to this office.
- Please affix a copy of EMT certification and Paramedic license to the application. If you do not have a copy of either certificate please indicate it and submit the application. This office will contact you should your involvement be necessary.

EMT Recertification (What to do before the expiration of your certification)

To qualify for **recertification** an applicant must recertify on or before the expiration date of the certification. If the certification is not renewed within 90 days of the due date then the certification will become void and or expire and as a result the applicant can no longer practice as an EMS provider (please see reinstatement requirements below). To qualify for **recertification** an applicant shall meet one of the following requirements:

- (C) Applicants must complete an approved refresher-training course, at intervals not to exceed twenty-four months for the period starting with the date of the initial certification and extending through the end of the sixth consecutive year of certification. Starting in the seventh year of certification and thereafter, an applicant for MRT and or EMT recertification shall complete an approved refresher-training course at intervals not to exceed thirty-six months*. Refresher training courses shall include both written and practical testing; or
- (D) Applicants may complete one out-of-state refresher training course throughout the lifetime of the certificate which may be accepted in lieu of a refresher training course required by this department provided: (i) the applicant is currently certified as an EMT for EMT recertification or as a person entitled to perform similar services under a different designation in another state; (ii) the refresher training program is equal to the refresher training program required by this department; and (iii) the refresher training program is approved by the appropriate regulatory body of such other state.

*To qualify for this provision, applicants must consecutively renew their certification without interruption for sixth consecutive years. Please note that at such time as the certification expires, the holder is no longer eligible for a three-year certification cycle and therefore will go back to a two-year recertification renewal cycle. In other words the holder of the certification needs to do 3 uninterrupted renewals before qualifying for the three-year certification cycle. Applicants who allow their certification to expire must meet the requirements for reinstatement as outlined below. It is recommended that applicants take the approved refresher-training course within six months of the expiration date of the certification. Please note that applicants will not receive credit for a refresher course that is completed more than one year before of the expiration of the certification.

Documentation Requirements:

- A completed application for EMT certification (FORM 202 attached). Complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office.

EMT Reinstatement (What to do after the expiration of your certification)

If the certification is not renewed within 90 days of the due date then the certification will become void and or expire and as a result the applicant can no longer practice as an EMS provider unless the certification is reinstated. Any person certified as an EMT whose certification has expired may apply for reinstatement of such certification as follows:

- a) If such certification expired one year or less from the date of application for reinstatement, such person shall complete an approved refresher course,
- b) if such certification expired more than one year but less than three years from the date of application for reinstatement, such person shall complete an approved refresher course and the written and practical examinations required for initial certification; or
- c) if such certification expired three or more years from the date of application for reinstatement, such person shall complete a full course and the written and practical examinations required for initial certification, or
- d) holders of temporary EMT permits (see requirements in page 6) may qualify for reinstatement as an EMT provided the applicant has completed an approved EMT refresher-training program prior to the expiration date of the temporary permit. Please ensure that a completed EMT application (FORM 202 attached) is submitted to this office. Please complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office verifying the completion of an approved EMT refresher-training program.

Applicants that let their certifications expire will lose the benefit to recertify every 3 years and thus will revert to renew their certifications every 2 years. The 3-year cycle will end 90 days after the expiration of the certification date. To go back to a 3-year cycle renewal, the applicants must recertify for 3 consecutive 2-year cycles.

Documentation Requirements:

- A completed application for MRT, EMT or EMT-I certification (FORM 202 attached). Complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office, and
- If such certification expired more than one year but less than three years (**not applicable to holders of temporary permits**) from the date of application for reinstatement, such person shall, in addition to the completion of a refresher course, complete a National Registry (NR) application and submit the NR application with your 202 Form to this office. For a National Registry application visit: http://www.nremt.org/downloads/emt_basic_application.pdf. (**Please disregard the instruction on the National Registry Application to include a \$20.00 application fee and to return it directly to the National Registry**). Also, note that your EMS-Instructor must complete Sections I and II on page 2 of the National Registry Application and Section III should be left blank.) Upon receipt and review of all application materials you will be scheduled for examination and notified in writing prior to the scheduled examination. For lists of examination dates visit the department's website: <http://www.state.ct.us/dph/Publications/BRS/HSR/exams.htm>. Please note that applicants must pass the practical examination prior to being eligible for the written examination.

3. Emergency Medical Technician- Intermediate (EMT-I) certification

Eligibility Routes - An applicant must meet one of the following requirements:

- 3(a) **Examination**- Current Connecticut EMT certification and successful completion of a Department-approved EMT-Intermediate 85 or 99 training programs in Connecticut or if outside of Connecticut, a program which includes those modules of a United States Department of Transportation, National Highway Traffic Safety Administration, EMT-I 85 or 99 National Standard Curriculum required by the Department; or
- 3(b) **Endorsement**- Current certification as an EMT-I by the National Registry of Emergency Medical Technicians or by a state or territory maintaining certification requirements equal to or higher than those of this state.
- 3(c) **Endorsement**- Current, valid license/certification in good standing as an EMT-I in Maine, Massachusetts, New Hampshire, New Jersey, New York, Rhode Island or Vermont.

Documentation Requirements:

- **If applying by Route 3(a) -Examination**, a completed application for EMT-I certification (FORM 202 attached). Complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office. **Please note that EMT-I's must contact either the instructor of the EMT-I course or if not trained in Connecticut then applicants may contact one of the Regional Offices in Connecticut to obtain examination information.** To access contact information for one of the Connecticut's Regional Offices via the Internet please go to <http://www.dph.state.ct.us/EMS/workgroups.htm#5>.
- **If applying by Route 3(b) -Endorsement**, a completed application for EMT-I certification (FORM 202 attached). Complete the top portion of Form 202 and arrange for official verification of EMT-I certification to be sent directly to this office the state's Licensing/Certification entity (use FORM 203 attached). The state or territory must also provide their current license/certification requirements. Please note that some jurisdictions may charge a fee for completion of the verification form; contact the jurisdiction for fee information. To access states contact information via the Internet please go to http://www.nremt.org/nremt/about/nremt_news.asp. Upon receipt and review of all application materials this office will determine your eligibility under this route. Applicants that do not meet the eligibility requirements may be required to take the practical and written examinations prescribed by this Department. Please see Examination Candidate Information section above for examination information.
- **If applying by Route 3(c) -Endorsement**, a completed application for EMT-I certification (FORM 202 attached) and arrange for official verification of **current or expired** EMT-I certification or licensure in another state(s) or territory to be sent directly to this office directly from the state's Licensing/Certification entity (use FORM 203 attached). The other state or territory must also provide their current license/certification requirements. Please note that some jurisdictions may charge a fee for completion of the verification form; contact the jurisdiction for fee information. To access jurisdictions contact information via the Internet please go to http://www.nremt.org/nremt/about/nremt_news.asp. Upon receipt and review of all application materials this office will determine your eligibility under this route. Applicants that do not meet the eligibility requirements may be required to take the practical and written examinations administered by this Department. Please see route 3(a) for examination information and documentation requirements.

EMT-I Recertification

(What to do before the expiration of your certification)

Recertification of EMT-I

To qualify for **recertification** an applicant must recertify on or before the expiration date of the certification. If the certification is not renewed within 90 days of the due date then the certification will become void and or expire and as a result the applicant can no longer practice as an EMS provider (please see reinstatement requirements above).

To qualify for **recertification** as an EMT-I, an applicant shall meet one of the following requirements:

- a) Complete a minimum of forty-eight (48) hours of Department approved refresher training for EMT I, at intervals not to exceed twenty-four months. For a list of available courses in Connecticut please visit our website at: http://www.dph.state.ct.us/EMS/Documents/Course_list.pdf. Please note that such refresher training program include a twenty-five (25) hours of Department approved EMT-B refresher training and a minimum of twenty-three (23) credit hours of continuing education as indicated below and shall include both written and practical testing for the EMT-B refresher component; or if an approved refresher training for EMT I is not completed then applicants must separately,
- b) Complete a minimum of twenty-five (25) hours of Department approved refresher training, at intervals not to exceed twenty-four months. Such refresher training programs shall include both written and practical testing; and

Complete a minimum of twenty-three (23) credit hours of continuing education at intervals not to exceed twenty-four (24) months. Such twenty-three (23) hours shall include, but not be limited to, coursework in intravenous techniques and advanced airway management. One credit hour shall mean a minimum of sixty (60) minutes of live instruction, which a participant physically attends, either individually or as part of a group. Please submit copies of such documents to the Department.

It is recommended that applicants take the approved refresher-training course within six months of the expiration date of the certification. Please note that applicants will not receive credit for a refresher course that is completed more than one year before of the expiration of the certification.

Documentation Requirements:

- A completed application for EMT-I certification (FORM 202 attached). Complete the top portion of Form 202 and forward the application to your training instructor or clinical care coordinator, who in turn must complete the bottom portion of the form and return it directly to this office.

EMT-I Reinstatement (What to do after the expiration of your certification)

If the certification is not renewed within 90 days of the due date then the certification will become void and or expire and as a result the applicant can no longer practice as an EMS provider unless the certification is reinstated. Any person certified as an EMT -I whose certification has expired may apply for reinstatement of such certification as follows:

- a) If such certification expired one year or less from the date of application for reinstatement, such person shall complete an approved refresher course,
- b) if such certification expired more than one year but less than three years from the date of application for reinstatement, such person shall complete an approved refresher course and the written and practical examinations required for initial certification; or
- c) if such certification expired three or more years from the date of application for reinstatement, such person shall complete a full course and the written and practical examinations required for initial certification.

Documentation Requirements:

- A completed application for EMT-I certification (FORM 202 attached). Complete the top portion of Form 202 and forward the application to your training instructor, who in turn must complete the bottom portion of the form and return it directly to this office, and
- If such certification expired more than one year but less than three years from the date of application for reinstatement, such person shall, in addition to the completion of a refresher course and the written and practical examinations required for initial certification.

Please note that the issue date of a new certification or reinstatement of an expired certification is based on the day that the course was completed. Certifications or reinstatement of expired certifications are granted for a period not to exceed two years to the nearest quarter that the training course was completed.

EMS courses are available throughout the state. For a list of available courses in Connecticut please visit our website at: http://www.dph.state.ct.us/EMS/Documents/Course_list.pdf.

For a copy of the 1994 United States Department of Transportation, National Highway Traffic Safety Administration, National Standard Curriculum, go the following website: www.nhtsa.dot.gov/people/injury/ems/nsc.htm

Applications and supporting documentation must be sent directly from the appropriate authority to:

CT Department of Public Health, EMS Certification • 410 Capitol Ave., MS #12 EMS • P.O. Box 340308 • Hartford, CT 06134-0308. Should you have any questions, please contact this office at (860) 509-7558.



Office of Emergency Medical Services
Emergency Medical Services Certification

FORM 202

Telephone (860) 509-7558

Fax (860) 509-7987

<http://www.dph.state.ct.us/EMS/index.htm>

Keeping Connecticut Healthy

Type of application:

☐ MRT

☐ EMT

☐ EMT-I

Please check one below:

☐ Initial (new course only) ☐ Endorsement ☐ Recertification ☐ Reinstatement: Certification No.: _____ Expiration: _____

☐ Temporary EMT permit: CT EMT certification No.: _____ Expiration: _____
CT Paramedic License No.: _____ Expiration: _____

Last Name: _____ First Name: _____ MI: _____

Date of Birth: ____/____/____ SSN: ____-____-____ Gender: ☐ Male ☐ Female

Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____

E-mail: _____

Please indicate the address to which your official certification documents, as well as all future mailings from this Department shall be sent (please type or print).

Address: _____

City/Town: _____ State: _____ Zip Code: _____

Are you now, or have you ever been, licensed, certified or registered as an EMS provider in any state or territory? Yes ☐ No ☐. If yes, list all states or territories _____

Are you now, or has the National Registry ever certified you? Yes ☐ No ☐. If yes, please indicate certification number: _____

Are you presently working in your licensed/certified profession? Yes ☐ No ☐. If yes, please indicate hours of practice per week _____

Provider information (If presently affiliated): Name of Service: _____

Address: _____

City, State, Zip: _____

Work E-mail: _____ Fax number: _____

At the exam, do you require accommodation for any disabling condition? Yes ☐ No ☐. If yes, please submit a written statement briefly describing the nature of your disability and the accommodation you are seeking. Please mail the request for accommodation directly to the National Registry at 6610 Busch Blvd, PO Box 29233, Columbus OH 43229, and attach a separate copy of the statement to the EMT application (202). Upon review of your request, this office and the National Registry will contact you regarding your request.

PROFESSIONAL HISTORY: Answer 1-8 by checking YES or NO. If you answer YES, follow directions below.

1. Have you ever been censured, disciplined, dismissed or expelled from, had admissions monitored or restricted, had privileges limited, suspended or terminated, been put on probation, or been requested to resign or withdraw from any of the following: YES ☐ NO ☐

- Any hospital, nursing home, clinic, or similar institution;
- Any health maintenance organization, professional partnership, corporation, or similar health practice organization, either private or public;
- Any professional school, clinical clerkship, internship, externship, preceptorship or postgraduate training program;
- Any third party reimbursement program, whether governmental or private?

2. Have you ever had your membership in or certification by any professional society or association suspended or revoked for reasons related to professional practice? YES ☐ NO ☐

3. Has any professional licensing or disciplinary body in any state, the District of Columbia, a United States possession or territory, or a foreign jurisdiction, limited, restricted, suspended or revoked any professional license, certificate, or registration granted to you, or imposed a fine or reprimand, or taken any other disciplinary action against you? YES ☐ NO ☐

4. Have you ever, in anticipation or during the pendency of an investigation or other disciplinary proceeding, voluntarily surrendered any professional license, certificate or registration issued to you by any state, the District of Columbia, a United States possession or territory, or a foreign jurisdiction? YES ☐ NO ☐

5. Have you ever been subject to, or do you currently have pending, any complaint, investigation, charge, or disciplinary action by any professional licensing or disciplinary body in any state, the District of Columbia, a United States possession or territory, or a foreign jurisdiction or any disciplinary board/committee of any branch of the armed services? You need not report any complaints dismissed as without merit. YES ☐ NO ☐

6. Have you ever been denied or surrendered a state or federal controlled substance registration, had it revoked or restricted in any way, or been warned, reprimanded, or fined by the responsible agency? YES ☐ NO ☐

If your answer is "yes" to any of the above questions (1-6), please give full details, names, addresses, etc. on a separate NOTARIZED statement.

7. Have you ever entered into, or do you currently have pending, a consent agreement of any kind, whether oral or written, with any professional licensing or disciplinary body in any state, the District of Columbia, a United States possession or territory, any branch of the armed services or a foreign jurisdiction? YES ☐ NO ☐

If "yes", give full details, names, addresses, etc. on a separate, NOTARIZED statement. Also submit a NOTARIZED copy of the agreement.

8. Have you ever been found guilty or convicted as a result of an act which constitutes a felony under the laws of this state, federal law or the laws of another jurisdiction and which, if committed within this state, would have constituted a felony under the laws of this state? YES ☐ NO ☐

If "yes", give full details, dates, etc. on a separate NOTARIZED statement and furnish a Certified Court Copy (with court seal affixed) of the original complaint, the answer, the judgment, the settlement, and/or the disposition.

I have reviewed the information provided and verify that it is accurate. I certify under penalties of perjury that I have not been convicted of a crime involving moral turpitude, nor am I addicted to the use of drugs or alcohol. I certify that I am the person on this application and that all statements are true and correct.

✓

Signature of Applicant

Date

TO BE COMPLETED BY TRAINING PROVIDER ONLY

For All Courses: The course was an: ☐ Initial ☐ Refresher training program for: ☐ MRT ☐ EMT ☐ EMT-I

Dates of Course:

MRT- Basic/Refresher - From: _____ To: _____ Course location _____ Course hours _____

EMT- Basic/Refresher - From: _____ To: _____ Course location _____ Course hours _____

EMT-I- Basic/Refresher - From: _____ To: _____ Course location _____ Course hours _____

EMS-I Certification Number: _____

For Connecticut Courses only: MRT- Basic/Refresher CT Course Approval Number: _____ Course hours _____

EMT- Basic/Refresher CT Course Approval Number: _____ Course hours _____

EMT-I- Basic/Refresher CT Course Approval Number: _____ Course hours _____

I certify that the applicant successfully completed a written and practical examination at the conclusion of this course. ☐ Yes ☐ No

I certify that the above named applicant successfully completed the above training program, including written and practical exams, and that such program met the requirements of DPH Regulations or, if outside of Connecticut, adhered to the U.S. DOT, NHTSA National Standard Curriculum.

✓

Signature of Course Instructor/Coordinator

Daytime Phone No.

Date

E-mail:

Printed Name of Course Instructor/Coordinator

✓

Signature of Course Medical Director (For EMT-I courses only)

CT Physician License No.

Date

Please fax or mail this form directly to: CT Department of Public Health, EMS Certification • 410 Capitol Ave., MS #12 EMS • P.O. Box 340308 • Hartford, CT 06134-0308.

IMPORTANT: The application packet for this profession consists of 18 pages, including instructions and eligibility requirements. Do not send this application unless you have read and understood all pertinent information.

Connecticut Department of Public Health

Verification of EMS License/Certification Status

TO BE COMPLETED BY APPLICANT ONLY

Applicant- Complete the top portion of this form and forward it to each state or territory (not applicable to the National Registry) where you have been licensed, certified, or registered as a emergency medical services provider (make copies as necessary).

Section 1: Applicant information

Last Name: _____ First Name: _____ MI: _____ SSN: _____ - _____ - _____

Address: _____
 No. & Street _____ City _____ State _____ Zip Code _____

Original License/Certification number _____ Date Issued _____
 (in the state to which the form is being forwarded)

Type: ☐ First Responder (MRT) ☐ Emergency Medical Technician ☐ Emergency Medical Technician-Intermediate

I hereby authorize the _____ to furnish the Connecticut Department of Public Health the information requested below.

Signature _____ Date _____

TO BE COMPLETED BY VERIFYING AGENCY ONLY

Section 2: Verifying Organization: Please complete this section as completely as possible. The information you provide will assist in the review of this individual's eligibility for Connecticut EMS certification.

I certify that the above named individual was issued license/certificate number _____
 to practice as a _____ effective _____

Certification Expiration Date: _____

What was the basis for licensure/certification/registration in your state? ☐ Examination ☐ Endorsement (Endorsement, from State(s)? _____)

What examination does your agency currently require for purposes of certification?

☐ National Registry ☐ Professional Examination Service ☐ State Board Examination ☐ Other: _____

Does your agency currently require successful completion of a training program adhering to the United States Department of Transportation, National Highway Traffic Safety Administration National Standard Curriculum? ☐ YES ☐ NO. If no, please provide a brief description of the requirements this individual completed for purposes of certification.

Has this individual ever been subject to disciplinary action of any type or is this individual currently the subject of a pending disciplinary action or unresolved complaint? ☐ YES ☐ NO. If yes, please forward all publicly disclosable information regarding the individual's status and the basis for same. Please advise this office if you require consent for release of this information from the applicant.

Signed: _____ Title: _____

Name of Agency: _____

Address: _____

City/State/Zip _____ Telephone Number: _____

PLEASE RETURN THIS FORM DIRECTLY TO: Department of Public Health
 EMS Certification
 410 Capitol Ave., MS #12 EMS
 P.O. Box 340308
 Hartford, CT 06134-0308
 (Phone) 860-509-7558
 (Fax) (860) 509-7987

**Regulations of Connecticut State Agencies
EMS Personnel**

Sec. 19a-179-16a. Minimum personnel qualifications - certification and licensure

(a) Medical Response Technician.

(1) In order to qualify for **initial** medical response technician certification, or for current certification of a lapsed certificate, an applicant shall meet one of the following requirements: (A) successfully complete, within twelve months of the date of application for certification, a training program, which if offered outside Connecticut, adheres to a United States Department of Transportation, National Highway Traffic Safety Administration, First Responder National Standard Curriculum and includes an examination. A training program offered in Connecticut shall be approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies and shall include an examination approved by the Department; (B) hold current certification as a person entitled to perform similar services under a different designation by the National Registry of Emergency Medical Technicians or its successor organization as approved by the Department, or by a state which maintains certification requirements equal to or higher than those in this state; or (C) have held emergency medical technician certification pursuant to section 19a-179-16a(b) of the Regulations of Connecticut State Agencies or emergency medical technician-intermediate pursuant to section 19a-179-16a(c) of the Regulations of Connecticut State Agencies or paramedic licensure pursuant to chapter 384d of the Connecticut General Statutes and completed the examination required in subparagraph (A) of this subdivision.

(2) In order to qualify for **recertification** an applicant shall meet the following requirement:

(A) complete a minimum of fifteen hours of refresher training, approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies, at intervals not to exceed twenty-four months for the period starting with the date of the initial certification and extending through the end of the sixth consecutive year of certification. Starting in the seventh year of certification and thereafter, an applicant shall complete fifteen (15) hours of refresher training, approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies, at intervals not to exceed thirty-six months. Refresher training programs shall include both written and practical testing; (B) individuals may complete one out-of-state refresher training program throughout the lifetime of the certificate which may be accepted in lieu of a refresher training program required pursuant to section 19a-179-16a(a)(2)(A) of the Regulations of Connecticut State Agencies provided: (i) the individual is currently certified as a medical response technician or as a person entitled to perform similar services under a different designation in another state; (ii) the refresher training program is equal to the refresher training program required pursuant to section 19a-179-16a(a)(2)(A) of the Regulations of Connecticut State Agencies; and (iii) the refresher training program is approved by the appropriate regulatory body of such other state.

(3) No certificate shall be issued to a person applying for certification pursuant to section 19a-179-16a(a)(1) of the Regulations of Connecticut State Agencies against whom a complaint is pending adjudication in another state or with the Department of Public Health.

(b) Emergency Medical Technician

(1) In order to qualify for **initial** emergency medical technician certification, or for current certification of a lapsed certificate, an applicant shall successfully complete a written and practical examination prescribed by the Department and meet one of the following requirements: (A) successfully complete a training program which, if offered outside Connecticut, adheres to the United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician National Standard Curriculum. A training program offered in Connecticut shall be approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies; (B) hold current certification to perform similar services under a different designation by the National Registry of Emergency Medical Technicians or its successor organization as approved by the Department, or by a state which maintains certification requirements equal to or higher than those in this state; or (C) hold a current unrestricted Connecticut registered nurse, advanced practice registered nurse, physician/surgeon, or physician assistant license and complete a minimum of twenty-five (25) hours of refresher training, approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies. (2) In order to qualify for **recertification**, an applicant shall meet one of the following requirements: (A) complete a minimum of twenty-five (25) hours of refresher training, approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies, at intervals not to exceed twenty-four months for the period starting with the date of the initial certification and extending through the end of the sixth consecutive year of certification. Starting in the seventh year of certification and thereafter, an applicant shall complete twenty-five (25) hours of refresher training, approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies, at intervals not to exceed thirty-six months. Such refresher training programs shall include both written and practical testing; (B) successfully complete the examination required pursuant to section 19a-179-16a(b)(1) of the Regulations of Connecticut State Agencies at intervals not to exceed twenty-four months for the

period starting with the date of the initial certification and extending through the end of the sixth consecutive year of certification. Starting in the seventh year of certification and thereafter, an applicant shall complete the examination required pursuant to section 19a-179-16a(b)(1) of the Regulations of Connecticut State Agencies, at intervals not to exceed thirty-six months; (C) individuals may complete one out-of-state refresher training program throughout the lifetime of the certificate which may be accepted in lieu of a refresher training program required pursuant to section 19a-179-16a(b)(2)(A) of the Regulations of Connecticut State Agencies provided: (i) the individual is currently certified as an emergency medical technician or as a person entitled to perform similar services under a different designation in another state; (ii) the refresher training program is equal to the refresher training program required pursuant to section 19a-179-16a(b)(2)(A) of the Regulations of Connecticut State Agencies; and (iii) the refresher training program is approved by the appropriate regulatory body of such other state; or (D) an applicant who is certified as an emergency medical services-instructor issued pursuant to section 19a-179-16a(d) of the Regulations of Connecticut State Agencies may qualify for recertification as an emergency medical technician provided such emergency medical services-instructor served as an emergency medical services-instructor within two years of application for recertification, for the required modules of a training program required pursuant to section 19a-179-16a(b)(1)(A) of the Regulations of Connecticut State Agencies or section 19a-179-16a(b)(2)(A) of the Regulations of Connecticut State Agencies or equivalent modules in any Department-approved initial or refresher course.

(3) No certificate shall be issued to a person applying for certification pursuant to section 19a-179-16a(b)(1) of the Regulations of Connecticut State Agencies against whom a complaint is pending adjudication in another state or with the Department of Public Health.

(c) Emergency Medical Technician-Intermediate

(1) In order to qualify for **initial** emergency medical technician-intermediate certification, or for current certification of a lapsed certificate, an applicant shall successfully complete, within one year of date of application, an examination prescribed by the Department, and meet the following requirements: (A) hold current emergency medical technician certification issued pursuant to section 19a-179-16a(b) of the Regulations of Connecticut State Agencies and successfully complete a training program which, if offered outside Connecticut, includes those modules of a United States Department of Transportation, National Highway Traffic Safety Administration, Emergency Medical Technician-Intermediate National Standard Curriculum required by the Department or if offered in Connecticut, shall be approved by the Department. A training program offered in Connecticut must be approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies; or (B) hold current certification to perform similar services under a different designation by the National Registry of Emergency Medical Technicians or its successor organization as approved by the Department, or by a state which maintains certification requirements equal to or higher than those in this state. (2) In order to qualify for **recertification**, an applicant shall meet the following requirements: (A) complete a minimum of twenty-five (25) hours of refresher training required pursuant to section 19a-179-16a(b)(2)(A) of the Regulations of Connecticut State Agencies and approved by the Department pursuant to section 19a-179-17 of the Regulations of Connecticut State Agencies, at intervals not to exceed twenty-four months. Such refresher training programs shall include both written and practical testing; and (B) complete a minimum of twenty-three (23) credit hours of continuing education at intervals not to exceed twenty-four (24) months. Such twenty-three (23) hours shall include, but not be limited to, coursework in intravenous techniques and advanced airway management. One credit hour shall mean a minimum of sixty (60) minutes of live instruction which a participant physically attends, either individually or as part of a group. (C) Each certified emergency medical technician-intermediate shall maintain written documentation of completion of continuing education activity for a period of four years. Said documentation may be maintained by the sponsor hospital or emergency medical services provider with which such certificate holder is affiliated or employed. The Department may inspect such certificate holder records, as it deems necessary. Such documentation shall be submitted to the Department only upon the Department's request to the certificate holder.

The certificate holder shall submit such records to the Department within forty-five days of the Department's request.

(3) No certificate shall be issued to a person applying for certification pursuant to section 19a-179-16a(c)(1) of the Regulations of Connecticut State Agencies against whom a complaint is pending adjudication in another state or with the Department of Public Health.

Connecticut General Statutes
Chapter 368d
EMS Personnel

Sec. 19a-88b. Renewal of license, certificate, permit or registration which becomes void while holder on active duty in the armed forces of the United States. Exceptions. (a) Notwithstanding section 19a-14 or any other provisions of the general statutes relating to continuing education or refresher training, the Department of Public Health shall renew a license, certificate, permit or registration issued to an individual pursuant to chapters 368d, 368v, 370 to 388, inclusive, 393a, 395, 398, 399, 400a and 400c which becomes void pursuant to section 19a-88 or 19a-195b while the holder thereof is on active duty in the armed forces of the United States, within six months from the date of discharge from active duty, upon completion of any continuing education or refresher training required to renew a license, certificate, registration or permit which has not become void pursuant to section 19a-88 or 19a-195b. A licensee applying for license renewal pursuant to this section shall submit an application on a form prescribed by the department and other such documentation as may be required by the department.

(b) The provisions of this section shall not apply to reservists or National Guard members on active duty for annual training that is a regularly scheduled obligation for reservists or members of the National Guard for training which is not a part of mobilization.

(c) No license shall be issued under this section to any applicant against whom professional disciplinary action is pending or who is the subject of an unresolved complaint.

Sec. 19a-89. Change of office or residence address. Whenever any person holding a license, certificate or registration issued by the Department of Public Health changes his office or residence address, he shall, within thirty days thereafter, notify said department of his new office or residence address.

Sec. 19a-195a. Regulations re recertification and state-wide standardization of certification. (a) The Commissioner of Public Health shall adopt regulations in accordance with the provisions of chapter 54 to provide that any person who has completed six years of continuous service as an emergency medical services technician shall be recertified every three years rather than every two years. For the purpose of maintaining an acceptable level of proficiency, each emergency medical services technician who is recertified for a three-year period shall complete twenty-five hours of refresher training approved by the commissioner at intervals not to exceed thirty-six months. (b) The commissioner shall adopt regulations, in accordance with the provisions of chapter 54, to (1) provide for state-wide standardization of certification for each class of (A) emergency medical technicians, including, but not limited to, paramedics, (B) emergency medical services instructors, and (C) medical response technicians, (2) allow course work for such certification to be taken state-wide, and (3) allow persons so certified to perform within their scope of certification state-wide.

Sec. 19a-195b. Reinstatement of expired certification. Validity of expired certificate. (a) Any person certified as an emergency medical technician, emergency medical technician-intermediate, medical response technician or emergency medical services instructor pursuant to this chapter and the regulations adopted pursuant to section 19a-179 whose certification has expired may apply to the Department of Public Health for reinstatement of such certification as follows: (1) If such certification **expired one year** or less from the date of application for reinstatement, such person shall complete the requirements for recertification specified in regulations adopted pursuant to section 19a-179, as such recertification regulations may be from time to time amended; (2) if such certification expired **more than one year but less than three** years from the date of application for reinstatement, such person shall complete the training required for recertification and the examination required for initial certification specified in regulations adopted pursuant to section 19a-179, as such training and examination regulations may be from time to time amended; or (3) if such certification **expired three or more** years from the date of application for reinstatement, such person shall complete the requirements for initial certification specified in regulations adopted pursuant to section 19a-179, as such initial certification regulations may be from time to time amended.

(b) Any certificate issued pursuant to this chapter and the regulations adopted pursuant to section 19a-179 which expires on or after January 1, 2001, shall remain **valid for ninety days** after the expiration date of such certificate. Any such certificate shall become void upon the expiration of such ninety-day period.

Connecticut General Statutes
Chapter 368d

Sec. 19a-179. (Formerly Sec. 19-73aa). Regulations. Issuance of certificate for certain applicants. (a) The commissioner shall adopt regulations, in accordance with chapter 54, concerning (1) the methods and conditions for the issuance, renewal and reinstatement of licensure and certification or recertification of emergency medical service personnel, (2) the methods and conditions for licensure and certification of the operations, facilities and equipment enumerated in section 19a-177, and (3) complaint procedures for the public and any emergency medical service organization. Such regulations shall be in conformity with the policies and standards established by the commissioner. Such regulations shall require that, as an express condition of the purchase of any business holding a primary service area, the purchaser shall agree to abide by any performance standards to which the purchased business was obligated pursuant to its agreement with the municipality.

(b) The commissioner may issue an emergency medical technician certificate to an applicant who presents evidence satisfactory to the commissioner that the applicant (1) is currently certified as an emergency medical technician in good standing in any New England state, New York or New Jersey, (2) has completed an initial training program consistent with the United States Department of Transportation, National Highway Traffic Safety Administration emergency medical technician curriculum, and (3) has no pending disciplinary action or unresolved complaint against him or her.

(NEW) (c) The commissioner may issue a temporary emergency medical technician certificate to an applicant who presents evidence satisfactory to the commissioner that (1) the applicant was certified by the department as an emergency medical technician prior to becoming licensed as a paramedic pursuant to section 20-206*ll*, and (2) the applicant's certification as an emergency medical technician has expired and the applicant's license as a paramedic has become void pursuant to section 19a-88 of the general statutes. Such temporary certificate shall be valid for a period not to exceed one year and shall not be renewable.

(NEW) (d) An applicant who is issued a temporary emergency medical technician certificate pursuant to subsection (c) of this section may, prior to the expiration of such temporary certificate, apply to the department for:

(1) Renewal of such person's paramedic license, giving such person's name in full, such person's residence and business address and such other information as the department requests, provided the application for license renewal is accompanied by evidence satisfactory to the commissioner that the applicant was under the medical control of a sponsor hospital on the date the applicant's paramedic license became void for nonrenewal; or

(2) Recertification as an emergency medical technician, provided the application for recertification is accompanied by evidence satisfactory to the commissioner that the applicant completed emergency medical technician refresher training approved by the commissioner not later than one year after issuance of the temporary emergency medical technician certificate. The department shall recertify such person as an emergency medical technician without the examination required for initial certification specified in regulations adopted by the commissioner pursuant to this section.

(NEW) (e) For purposes of subsection (d) of this section, "medical control" means the active surveillance by physicians of mobile intensive care sufficient for the assessment of overall practice levels, as defined by state-wide protocols, and "sponsor hospital" means a hospital that has agreed to maintain staff for the provision of medical control, supervision and direction to an emergency medical service organization, as defined in section 19a-175, and its personnel and has been approved for such activity by the Office of Emergency Medical Services.

**Connecticut General Statutes
Chapter 368a**

Sec. 19a-88. Annual renewal of licenses by certain health practitioners.

(e) Each person holding a license or certificate issued under section 19a- 514 and chapters 370 to 373, inclusive, 375, 378 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399 or 400a and section 20-206n or 20-206o shall, annually, during the month of his birth, apply for renewal of such license or certificate to the Department of Public Health, giving his name in full, his residence and business address and such other information as the department requests. Each person holding a license or certificate issued pursuant to section 20-475 or 20-476 shall, annually, during the month of his birth apply for renewal of such license or certificate to the department. Each entity holding a license issued pursuant to section 20-475 shall, annually, during the anniversary month of initial licensure, apply for renewal of such license or certificate to the department.

(f) Any person or entity which fails to comply with the provisions of this section shall be notified by the department that his license or certificate shall become void ninety days after the time for its renewal under this section unless it is so renewed. Any such license shall become void upon the expiration of such ninety-day period.